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FOR ACTION

COUNTRY PROGRAMME RECOMMENDATION*

Nicaragua

The Executive Director recommends that the Executive Board approve the country programme of Nicaragua for the period 1992-1996 in the amount of $5 million from general resources, subject to the availability of funds, and $9,812,000 in supplementary funds, subject to the availability of specific-purpose contributions.

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* In order to meet documentation deadlines, the present document was prepared before aggregate financial data were finalized. Final adjustments, taking into account unspent balances of programme cooperation at the end of 1991, will be contained in the "Summary of 1992 recommendations for general resources and supplementary funding programmes" (E/ICEF/1992/P/L.2 and Add.1).

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THE SITUATION OF CHILDREN AND WOMEN

1. Following 10 years of Sandinista Government, free democratic elections were held in Nicaragua in February 1990. The winners of the election, a coalition of 14 parties united in their opposition to the Sandinistas, assumed power in April 1990. Immediately following the elections the new Government, headed by Mrs. Violeta Chamorro, and the Sandinistas, now the largest opposition party, embarked on a process of negotiation and consensus-building to reach agreements aimed at ensuring a peaceful transition to democracy. This concerted effort to reach political and social consensus has emerged as a continuous negotiating process referred to as concertación, through which economic and social policies aimed at bringing about national reconstruction and economic recovery are decided. The concertación process has also become an important strategy for maintaining internal political stability and peace.

2. Between 1980 and 1990, some major social gains were made under the Sandinista Government, including: (a) a rapid increase in immunization coverage of children under the age of one year from around 20 per cent in 1980 to near-attainment of universal child immunization in 1990; (b) a decrease in the infant mortality rate (IMR) from 85 per 1,000 live births to 69 in 1985; (c) a reduction of illiteracy rates from 50 to 13 per cent; (d) the establishment of an effective primary health care (PHC) system; and (e) an increase in access to safe water from 41 per cent of the population in 1980 to 54 per cent in 1990.

3. At the same time, however, during the last decade, Nicaragua experienced accelerated impoverishment: the multiple effects of the civil war caused major infrastructure damage estimated at $40 billion; the value of export commodities dropped by 40 per cent; and real wages of Nicaraguan workers plummeted by more than 85 per cent. Unemployment increased, inflation soared, consumption was drastically reduced and per capita calorie consumption dropped 25 per cent below recommended levels. In addition, by 1990 more than 54,000 Nicaraguans had been killed or injured as a result of the war and more than 354,000 had been displaced from their homes.

4. Nicaragua is now one of Latin America's poorest countries. In 1991, the Ministry of the Economy and Development national development strategy estimated gross domestic product (GDP) per capita at $407. According to a recent study supported by the United Nations Development Programme (UNDP), in 1985, 70 per cent of the population, or some 2.6 million people (54.8 per cent of the population in urban areas and 85.9 per cent of the rural population), were living in poverty. Some 39 per cent of this total comprised people living in extreme poverty. Of a total of nine regions, areas with the highest incidence of poverty include: the North and South Atlantic Autonomous Regions (85 per cent); Region I, comprising the departments of Estelí and Nueva Segovia (82 per cent); Region VI, comprising the departments of Matagalpa and Jinotega (81 per cent); and Region V, comprising Chontales and Boaco (76 per cent).

5. During the last two years the Government of Nicaragua has initiated economic adjustment measures resulting in budget cutbacks for basic social services and subsidies (water, light, transport) and painful increases in the cost of the basic food basket. While those measures have succeeded in slowing the rate of inflation, they have added to the already high social costs of the recently ended hostilities and levels of poverty affecting the most vulnerable groups, in particular women and children. An economic restructuring programme is also under way, aimed at reducing government controls, encouraging individual initiative and giving the private sector the opportunity to stimulate economic growth. Estimates made in mid-1991 indicate that some 24,000 State employees at the central government level alone had been made redundant or accepted incentives to leave. Since many of the most qualified professionals opted for the leave incentive bonus, this has seriously weakened many social sector institutions.

6. Between 1980 and 1990, the country's total population increased by 42 per cent to 3.8 million. Currently the average age of the population is 16 years, and 46 per cent are children up to 14 years of age. During this period the urban population grew by 60 per cent. One third of the population is now concentrated at Managua, the capital city, where more than 55 per cent of houses have only one room to provide shelter to an average of six family members.

7. The country is currently divided into six regions, a Special Zone and two autonomous regions. The Government is considering a reorganization of the administrative division of the country, returning to a system of territorial departments. Prior to the administrative decentralization of the country into regions, there were 16 departments. At the local level, there are presently 131 municipalities.

8. Recent data referred to in the Ministry of Health's Plan Maestro de Salud (Master Health Plan) 1991-1996 suggest that IMR in Nicaragua increased in 1990 after several years of decline. Leading causes of IMR, accounting for 81 per cent of infant deaths, are diarrhoea, respiratory illnesses, perinatal complications and malnutrition. Regions with the highest IMR are Regions VI (departments of Matagalpa and Jinotega) and II (departments of León and Chinandega).

9. Malnutrition is prevalent throughout the population, affecting in particular infants, children and mothers. A 1986 national school height census of primary schoolchildren revealed that 22 per cent of children aged six to nine years of age suffered from stunting. The Ministry of Health's nutritional surveillance system has identified severe malnutrition or wasting in 2.5 per cent of children. In addition, around 3.9 per cent of school-age children suffer from goitre. Some 13 per cent of children are born underweight.

10. Nicaragua has one of the lowest rates of access to drinking water and basic sanitation in Central America. In 1990, 78 per cent of the urban sector had access to potable water and 31.8 per cent to sewage systems. The areas with least access are located in the Atlantic region. In the rural sector, only 19.5 per cent of the population have clean water within reasonable access and approximately 16 per cent have adequate sanitation facilities.

11. While preschool coverage increased considerably between 1980 and 1988 (from 4,000 to 82,000 children), this is still less than 10 per cent of all children. Approximately 860,000 children under the age of seven years do not have access to either day care or preschool education. The situation is markedly worse in rural areas. Furthermore, approximately 150,000 children between the ages of 7 and 12 years (25 per cent) do not participate in primary education programmes, where net enrolment is 75 per cent (69 per cent in rural areas and 79 per cent in urban areas). Despite the achievements of the 1980 literacy campaign, the national illiteracy rate is now estimated at 25 per cent.

12. A 1991 study indicates that more than 550,000 children, or 31 per cent of all Nicaraguan children under the age of 15 years, are living in especially difficult circumstances. Of those, approximately 60,000 work in the informal and formal sectors, and 6,000 are street children, abandoned or living in special institutions. Some 24 per cent of all girls between 10 and 14 years of age participate in some type of labour. Given the current economic crisis, it is projected that the increase in the numbers of children living in these circumstances will exceed the rate of increase in the population at large.

13. Some 34 per cent of women are heads of families and 25 per cent of all women are illiterate. Employment opportunities for young women and girls are generally limited to work as domestics and in the informal economy, with no benefits or protection. Data available for 1989 indicate that close to 55 per cent of all households headed by women are unable to meet their basic needs.

14. Nicaraguan women have an average of five children, with the highest birth rates occurring among women from lower socio-economic strata and among rural women. Some 21 per cent of live births are to women under the age of 20 years. According to estimates from the National System of Vital Statistics, maternal mortality averages around 159 per 100,000 live births. Maternal mortality rates are highest in the North Atlantic Autonomous Region at 384 per 100,000 live births, followed by Regions VI, V and I referred to in paragraph 4 above. About 36 per cent of births take place in hospitals, and 15 per cent are attended by unqualified personnel. A 1986 Ministry of Health study found that more than 26 per cent of all institutional births presented some clinical difficulty. Although no specific data exist regarding the nutritional status of pregnant women, there are indications that this is a growing problem.

PROGRAMME COOPERATION, 1990-1991

15. Following the results of the February 1990 elections, a bridging programme was approved for the period 1990 to mid-1992 pending the preparation of a full programme of cooperation with the new Government. During this period, UNICEF continued to provide support for programmes initiated during the previous country programme cycle, including national programmes in the fields of health (child survival), for children living in especially difficult circumstances, and education and area-based programmes in three regions.

Health

16. UNICEF-supported health interventions were implemented within the framework of the subregional child survival programme financed by the Government of Italy and the European Economic Community (EEC). Through this programme, UNICEF support has focused on the expanded programme on immunization (EPI), the control of diarrhoeal diseases (CDD) and acute respiratory infections (ARI), the promotion of breast-feeding, health education, integrated maternal and child health care (MCH), and strengthening of health information systems through the establishment of sentinel sites. In 1991, special attention was also given to a joint Pan American Health Organization (PAHO)/UNICEF-supported cholera control and prevention campaign and to assisting the Ministry of Health with the preparation of an emergency programme for the Atlantic Coast. In addition, support was provided for strengthening nutrition surveillance systems in all health regions of the country.

17. Some major achievements included: 80 per cent vaccination coverage of children under the age of one year for all major antigens except the combined diphtheria/pertussis/tetanus vaccine; an increase in the number of oral rehydration units from 472 in 1985 to 1,040 in 1990; development of norms and training of health personnel in the control of ARI; and training of approximately 30,000 health brigadistas (voluntary workers) and traditional birth attendants (TBAs). The need still exists, however, to improve and strengthen CDD and ARI interventions, to reactivate the promotion of breast-feeding initiatives and to increase immunization coverage in areas where coverage levels are below the national average.

18. Two evaluations, one carried out by UNICEF and the Ministry of Health and another by the donors, have concluded that this programme played a vital role in the expansion of PHC coverage and improvement in the quality of services, in particular MCH care. None the less, some weaknesses were also noted, such as the vertical delivery of services under EPI, the setting of over-ambitious goals and a tendency towards centralized decision-making. The need for further strengthening of local-level health service infrastructure and capacity was also highlighted.

Education

19. UNICEF cooperation in education has focused on primary education, preschool education and special education for disabled children. These efforts have been relatively restricted in scope during this period of cooperation however, due to limited availability of financial resources. Emphasis was placed on promotion of the education for all agreements, and technical and financial support were provided to the Ministry of Education in conducting a national congress on "Education By and For All". The congress - the culmination of a series of local and regional conferences held around the country to identify local-level educational priorities - established primary education as the first priority and preschool education as a second priority. A national commission has since been established to monitor and follow up on these agreements. During this period support was also provided for a study on the variables that contribute to the alarmingly high rates of primary school drop-out and repetition, a review of the situation of the country's multi-grade schools, in-service training of 3,000 teachers and the supply of educational materials and textbooks. In the field of special education, support was provided to a non-governmental organization (NGO) working with parents of the disabled.

Integrated rural development

20. This programme is being implemented in those areas with the greatest concentrations of poverty in three regions in Nicaragua. Its thrust has been to improve access to and expand coverage of area-based services in these regions and to improve the quality and integration of basic services by strengthening local planning and implementation capacities, including community participation. Basic health and education, children's welfare, food security and water supply and sanitation have been the focus of basic services interventions in these priority areas.

21. In 1991, an external evaluation of the programme highlighted a number of positive achievements, including increased access of the beneficiary population to basic services; strengthening of local-level programme planning and management capacities; training of 1,399 TBAs, 5,392 communal leaders and 4,162 health volunteers; and increased immunization coverage. The evaluation also highlighted the need for setting more realistic programme objectives vis-à-vis the programme funding level; strengthening monitoring and evaluation activities; greater emphasis on actions aimed at women; and improved coordination and convergence of activities.

Water supply and sanitation

22. UNICEF has provided technical support to central-level water supply and sanitation departments and at the regional level has supported interventions in the deprived areas of Regions I, V and VI referred to in paragraph 4 above, within the context of the rural development programme. UNICEF-supported activities have included construction of deep wells using high-speed drilling rigs, hydrogeological surveys, the training of local technicians and provision

of clean water and improved sanitation facilities using low-cost technologies. Approximately 30,000 people have benefited from increased access to clean water and 24,000 people from excreta disposal facilities. Coordination with other international agencies and international and local NGOs involved in water supply and sanitation activities has resulted in standardization of equipment and programme methodologies for all donor-supported water supply and sanitation projects in the country. Following the results of an evaluation carried out in 1990, greater emphasis was placed on environmental health and hygiene education activities in 1991. These activities were accelerated as part of the cholera prevention and control campaign and will continue to be emphasized in future years.

Children in especially difficult circumstances

23. Consistent with a regional initiative to acquire improved information for planning and monitoring purposes, during this period of cooperation, a comprehensive situation analysis was carried out jointly in 1991 with government institutions and NGOs. This exercise has increased inter-agency cooperation and coordination, and the results have been used to raise public awareness of such children. An agreement was also reached with the Inter-American Development Bank for financing a portion of this subregional programme.

Advocacy

24. Advocacy and social communication activities were intensified during this period, focusing in particular on adjustment with a human face, education for all, the Convention on the Rights of the Child and follow-up to the World Summit for Children. Special efforts were made to link these activities to the new programme preparation process and the formulation by the Government of Nicaragua of its National Programme of Action for Human Development, Youth and Children. That programme was prepared by an interministerial and inter-agency commission and signed by the President of Nicaragua at the December 1991 meeting of Central American heads of State at Tegucigalpa, Honduras.

25. Cooperation with other United Nations agencies has been effective during this period and a close working relationship has been maintained with PAHO/World Health Organization (WHO) in particular, as well as with UNDP, the United Nations Educational, Scientific and Cultural Organization (UNESCO), the Office of the United Nations High Commissioner for Refugees (UNHCR) and the World Food Programme (WFP). Coordination of activities has also been established at the project level with Swiss COSUDE, the Cooperation for American Relief Everywhere, Red Barne and Radda Barnen.

Lessons learned

26. In addition to the programmatic lessons already referred to above, other more general lessons which have been taken into consideration in the proposed new programme of cooperation include the need for increased emphasis on strengthening municipal- and local-level institutional capacity; greater

coordination between UNICEF-supported programmes both at national and local levels; strengthened inter-agency and inter-institutional coordination at both central and local levels; and broad mobilization of resources and partners including Government, international and national NGOs, and other grass-roots organizations.

RECOMMENDED PROGRAMME COOPERATION, 1992-1996

Recommended general resources: $5,000,000
Supplementary funding: $9,812,000

Recommended programme cooperation a/

(In thousands of United States dollars)

	General resources	Supplementary funds b/	Total
Health	1 050	-	1 050
Basic education	1 075	-	1 075
Children in especially difficult circumstances	750	3 000	3 750
Urban water supply	-	812	812
Integrated rural development	-	6 000	6 000
Planning and social policy support	825	-	825
Programme support	1 000	-	1 000
Monitoring and evaluation	300	-	300
Total	5 000	9 812	14 812

a/ The breakdown for estimated yearly expenditures is given in table 3.

b/ In addition, there are also funded supplementary funding projects shown in table 3.

27. The proposed programme of cooperation has been developed taking into consideration the situation of children and women in Nicaragua, the review of past cooperation, the Convention on the Rights of the Child and the national programme of action. Within this legal and political framework, the programme of cooperation aims to support the national programme medium-term (1996) goals for infant, child and maternal mortality reduction, and protection and improvement of the well-being of children, women and their environment.

28. The overall thrust of the programme will be to focus high priority on the satisfaction of basic needs of the most vulnerable groups and poorest sectors

of society. These goals are seen as attainable given the political process of concertación referred to in paragraph 1 above.

29. Building on the achievements and lessons learned during the past period of cooperation, the programme consists of national-level interventions and area-based programmes in some of the poorest regions of the country. Country-specific interventions will be further strengthened by partially funded subregional initiatives, already approved by the UNICEF Executive Board, for integrated PHC; education for development; water supply and sanitation; and children in especially difficult circumstances.

30. Strategic components of the programme will include: (a) social policy development support through advocacy efforts and technical assistance oriented towards development with a human face; (b) the coordination of activities between programmes to ensure the greatest possible complementarity of multisectoral interventions; (c) strengthening local-level institutional capacity for planning, implementing and monitoring social programmes, including information systems to monitor progress towards meeting the goals of the national programme of action; (d) collaboration with the private sector and NGOs; and (e) increased inter-agency coordination, both with other agencies in the United Nations system and with bilateral agencies.

Planning and social policy support

31. This programme cuts across the entire country programme and aims ultimately to increase government and public awareness of the needs of children and women and to mobilize more local, national and multilateral resources for programmes benefiting vulnerable groups. Through this programme, technical assistance and advocacy support will be provided to implement and monitor attainment of the national programme goals and to develop social policies benefiting poor women and children in particular.

32. Major programme interventions will include: (a) the use of mass media to increase public awareness of the Convention on the Rights of the Child, the national programme of action and the situation of children and women in Nicaragua; (b) strengthening national and local-level capacity for monitoring the situation of women and children; (c) support for studies that can be used for advocacy, social policy formulation and decision-making purposes; and (d) strengthening existing institutional capacity for collecting, processing and disseminating social statistics and related information.

33. Given the cross-cutting nature of this programme, particular emphasis will be placed on strengthening inter-agency work and establishing a broad alliance of partners (Government, private sector and NGOs) to mobilize around the principle of a "first call for children".

Health

34. Using the Government Master Health Plan for 1991-1996 as a basis, and building on lessons learned during the previous period of cooperation, UNICEF assistance to the health sector aims to support the medium-term goals of the national programme of action for infant, child and maternal mortality reduction. To this end, assistance will be provided in support of government efforts to further decentralize and extend coverage of PHC services through the local integrated health care system and integrated MCH interventions, including control of ARI, CDD, EPI, safe motherhood, promotion of breast-feeding and other child growth and development interventions.

35. UNICEF assistance for the local integrated health care system will be emphasized in three regions where IMRs are well above the national average. Support will be provided for strengthening local-level capacity for planning, implementing and monitoring health interventions; developing local training systems and training of health personnel, including community health personnel; improving basic health infrastructure; and promoting popular participation and multisectoral participation in health-related activities through the consejos municipales de salud (municipal health councils). The major thrust of these interventions will be to improve MCH, supported by social communication and mobilization.

36. Inter-agency coordination and collaboration already established with PAHO/WHO, the United States Agency for International Development (USAID), the United Nations Population Fund (UNFPA) and the Institute of Nutrition of Central America and Panama will continue to be emphasized and strengthened.

Education

37. Building on past experience, four areas of educational services will be addressed: early stimulation and preschool, covering children up to 6 years of age; primary, concentrating on the child population in multi-grade schools aged 7 to 12 years; literacy, focusing in particular on indigenous young and adult women along the Coco River; and education of disabled children. The overall objective of UNICEF assistance will be to support low-cost and viable initiatives aimed at increasing coverage and improving the quality of these services.

38. In the area of early childhood education, the focus will be on systematizing the community preschool model developed by the Ministry of Education and increasing coverage of preschool services to approximately 25 per cent of the eligible population group. In the field of primary education, UNICEF will support government initiatives to guarantee all children basic education through the fourth grade, although advocacy efforts will promote the completion of the sixth grade. More specifically, assistance will be provided to improve the quality of multi-grade schools in rural areas and to develop alternative modalities for the instruction of over-age children, children affected by war and indigenous children. UNICEF-supported adult literacy interventions will be limited to female literacy along the Coco

River; assistance will be provided for the development of literacy materials that are sensitive to the traditional belief and cultural systems of this population group. UNICEF will also continue to support expansion of community-based alternatives to special education schools and advocate the rights of disabled children, including their improved access to basic services and integration into society.

39. While this programme is national in scope, special emphasis will be placed on subnational interventions and demonstration projects that can be systematized and subsequently replicated. UNICEF technical and financial assistance will be provided for training teachers and voluntary personnel at the preschool, primary and adult education levels; developing in-service distance teacher training modules; improving curriculum and support materials; providing basic educational supplies and equipment; parent education, especially in areas related to early childhood development and early stimulation; and promoting community involvement in the educational process.

Children in especially difficult circumstances

40. The objectives of this programme are: (a) to promote and mobilize increased public support for the protection and development of children living in especially difficult circumstances; (b) to support the development of a national policy and plan of action for protecting these children within the framework of the Convention on the Rights of the Child; and (c) to strengthen national capacity for implementing alternative models of care for these children.

41. More specifically, UNICEF interventions will focus on: (a) support for the development and validation of alternative models of care for street and working children, children living in institutions, children affected by the war and indigenous children and women of the Coco River Communities (Wangki); (b) provision of technical and financial assistance for strengthening institutional capacities to respond effectively and inexpensively to the needs of these children; and (c) research, policy analysis, social communication and advocacy. Implementing partners will include the Nicaraguan Institute for Social Services and Welfare, the Ministry of Education and various NGOs.

42. An increase of supplementary funds is being requested for this programme in order to include country-specific activities not contemplated when the subregional programme for children in especially difficult circumstances was approved by the UNICEF Executive Board in 1990. These additional funds will be used to expand programme coverage and support new initiatives such as family day-care services and accelerated primary education and vocational programmes for street and war-affected children.

Rural water supply and sanitation

43. This programme, which is partially funded by the Government of Sweden, was developed as part of a subregional water supply and sanitation programme approved by the UNICEF Executive Board in 1991. It is being implemented in

three regions and aims: (a) to improve the health status of the population in project areas through the provision of safe water supplies, basic sanitation facilities and health education; (b) to reduce the time and energy used by women and children in the collection of water; (c) to increase awareness of communities and authorities of the importance of environmental conservation; and (d) to strengthen the capacity of the Nicaraguan Institute of Aqueducts and Sewerage to plan and implement water supply and sanitation programmes in rural communities with populations of 2,000 and less. An estimated 262,000 people will benefit.

44. Strategic considerations include the promotion and use of low-cost systems that are easy to maintain and use spare parts that can be locally produced wherever possible, and the organized participation of communities in selection of sites and maintenance activities.

Urban water supply and sanitation

45. The overall objective of this programme is to improve the living conditions and health status of selected population groups in marginal urban areas of Managua through the provision of safe drinking water and adequate excreta disposal facilities. An estimated 90,000 people will benefit from the programme, which will be implemented in 20 marginal urban neighbourhoods selected on the basis of their lack of access to services and high incidence of diarrhoeal diseases. It is expected that the programme's working methodology will serve as a self-sustaining model for expansion to other marginal urban areas. Major lines of intervention will include water supply, sanitation, community organization and environmental and hygiene education in order to ensure appropriate use of water and sanitation facilities.

46. Strategic elements of this programme include the establishment of a revolving fund, the development of cost-recovery mechanisms, the use of appropriate low-cost technologies, the training of community water and sanitation teams and the creation of a special project implementation unit within the Nicaraguan Institute of Aqueducts and Sewerage for water supply programmes in marginal urban areas.

Integrated rural development

47. This programme was initiated under an earlier period of cooperation. Its objective is to improve the quality of life of vulnerable groups in selected communities of three of the country's poorest regions (Regions I, V and VI). To this end, UNICEF technical and financial support is being provided for decentralized expansion of basic services coverage; strengthening local-level institutional capacity for intersectoral collaboration and for planning, monitoring and implementing social programmes; productive activities; and community participation. Major components of the programme are basic health and education, children's welfare, community organization, social mobilization and monitoring and evaluation.

48. The decision to continue UNICEF support for this programme under the current period of cooperation is based in part on the results of two evaluations undertaken in 1991, which led to an organizational restructuring of the programme and a redefinition of priority interventions. The need to link this programme with other UNICEF-supported programmes which are national in scope has also been adjusted, and it is now expected that this subnational programme will also serve to develop strategies and service delivery models for achieving municipal- and local-level goals of the national programme of action which can subsequently be used for expansion to other areas. Under the current programme of cooperation, increased emphasis will be given to improving the situation of women in the project areas.

Monitoring and evaluation

49. Special efforts will be made to strengthen and improve the internal capacity of the UNICEF office in Nicaragua for monitoring activities, and greater emphasis will be placed on the systematization and documentation of project experiences to strengthen advocacy and expansion efforts. The office will monitor implementation of the proposed programmes through on-site visits, annual reviews and the establishment of indicators for monitoring the programmes' progress. Given the positive experiences of the sentinel site methodology in monitoring and evaluation of health programmes at the local level, inclusion of additional indicators in that methodology is anticipated in order to widen its scope.

50. During the course of the proposed programme of cooperation, evaluations will be carried out of the programmes concerned with children in especially difficult circumstances, water supply and sanitation, integrated rural development and health. In addition, two studies have been planned for 1992. The first will identify the main causes of lost immunization opportunities, while the second will be a knowledge, attitude and practices survey of breast-feeding and infant nutrition. It is anticipated that other studies will also be planned for subsequent years.

Programme support

51. The Nicaragua office has budgeted programme funds to ensure adequate technical, administrative and logistical support for implementing the proposed country programme. This will be achieved through the deployment of project staff in certain sectoral areas and the use of technical consultants on a temporary basis for specific thematic issues. The office in Nicaragua was upgraded to a full-fledged office in July 1991 and is now totally responsible for all administrative and operational support functions previously undertaken by the area office in Guatemala.

Cooperation with other United Nations organizations

52. The country programme will be closely coordinated with other United Nations agencies. In addition, special efforts will be made to cooperate with national and international NGOs operating in the same areas as UNICEF.

TABLE 1. BASIC STATISTICS ON CHILDREN AND WOMEN

Nicaragua (1990 and earlier years) UNICEF country classification

Under-five mortality rate	78	(1990)	High U5MR
Infant mortality rate	56a	(1990)	High IMR
GNP per capita	$ 830	(1987)	Lower-middle GNP
Total population	3871.0 Thousands	(1990)	

KEY INDICATORS FOR CHILD SURVIVAL AND DEVELOPMENT		1970	1980	1985	1990
Births	(thousands)	98	123	138	156
Infant deaths (under 1)	(thousands)	11	10	10	9
Under-five deaths	(thousands)	16	16	15	12
Under-five mortality rate (per 1,000 live births)		168	133	107	78
Infant mortality rate (under 1) (per 1,000 live births)		108	85	69	56a

		About 1980	Most recent
Underweight children (under 5) (% weight for age, 1980-1982)	Moderate & severe	11	..
	Severe	1	..
Babies with low birth weight (%, 1979/1984)		..	15
% of primary school children reaching final grade (1980/1988)		27	35

NUTRITION INDICATORS		About 1980	Most recent
Mothers breast-feeding at 3/6/12 months (%)		../../..	../../..
Prevalence of wasting (%, 1980-1982)		0	..
Prevalence of stunting (%, 1980-1982)		22	..
Daily per capita calorie supply (% of requirements, 1979-1981/1988)		103	105
Food production per capita index (Index 1979-1981=100, 1980/1990)		86	62
Household expenditure (% of total income, 1980-1985)	All food/cereals		../..

HEALTH INDICATORS		About 1980	Most recent
ORT use rate (%, 1988)			38
Access to health services	Total	..	83
(% of population, 1980/1987)	Urban/rural	.. /..	100/ 60
Access to safe water	Total	41*	54
(% of population, 1980/1990)	Urban/rural	70*/ 7*	78/ 18
Access to adequate sanitation	Total	..	27
(% of population, 1980/1987)	Urban/rural	34 /..	35/ 16
Births attended by trained personnel (%, 1984)		..	41
Maternal mortality rate (per 100,000 live births)		..	..

Immunization		1981	1985	1990
One-year-olds (%) immunized against:	Tuberculosis	65	97	81
	DPT	23	35	65
	Polio	52	70	86
	Measles	20	49	82
Pregnant women (%) immunized against	Tetanus	..	24	25

TABLE 1 (continued)

Nicaragua

EDUCATION INDICATORS		About 1980	Most recent
Primary enrolment ratio (gross/net) (%, 1980/1987)	Total	99/ 74	99/ 76
	Male	96/ 73	94/ 74
	Female	102/ 75	104/ 79
Secondary enrolment ratio (gross/net) (%, 1980/1987)	Total	43/ 23	43/ ..
	Male	40/ 21	29/ ..
	Female	45/ 25	58/ ..
Adult literacy rate, 15 years & older (%, 1970/1990)	Total	58	..
	Male/female	58/ 57	../ ..
Radio/television sets (per 1,000 population, 1980/1988)		242/ 58	246/ 61

DEMOGRAPHIC INDICATORS		1970	1980	1985	1990	2000**
Total population	(Thousands)	2053.0	2771.0	3272.0	3871.0	5261.0
Population aged 0-15 years	(Thousands)	..	1308.2	1606.5	1863.7	2370.4
Population aged 0-4 years	(Thousands)	..	517.0	604.1	690.1	823.5
Urban population (% of total)		47	53	57	60	66
Life expectancy at birth (years)	Total	53	58	62	65	69
	Male	52	57	60	63	68
	Female	54	59	63	66	71
Total fertility rate		6.9	6.1	5.7	5.3	4.3
Crude birth rate (per 1,000 population)		48	45	43	40	34
Crude death rate (per 1,000 population)		14	11	9	7	5

		About 1980	Most recent
Contraceptive prevalence rate (%, 1979/1981)		9	27
Population annual growth rate (%, 1965-1980/1980-1990)	Total	3.1	3.3
	Urban	4.6	4.5

ECONOMIC INDICATORS		About 1980	Most recent
GNP per capita annual growth rate (%, 1965-1980/1980-88)		-0.7	-4.7
Inflation rate (%, 1965-1980/1980-1988)		9	87
Population in absolute poverty (%, 1977/1988)	Urban/rural	21/ 19	.. / ..
Household income share (%, 1977/1988)	Top 20%/bottom 40%	../ ..	.. / ..
Government expenditure	Health/education	15/ 12	11*/ 9*
(% of total expenditure, 1980/1987)	Defence	11	50
Household expenditure (% of total income, 1980-1985)	Health/education		.. /..
Official development assistance: (1980/1989)	US$ millions	223	227
	As % of GNP	11	..
Debt service (% of goods & services exports, 1980/1989)		..	..

a/ Field office data indicate that IMR figures may have increased.

Definitions, sources and symbols are described in the section preceding these data sheets.

* UNICEF field office source.

** United Nations Population Division projections based on past and current trends.

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TABLE 2. EXPENDITURE UNDER PREVIOUS COOPERATION PERIOD, 1990-1991

(In thousands of United States dollars)

COUNTRY: NICARAGUA
LATEST BOARD APPROVAL: 1990
GENERAL RESOURCES: $1,450,000

	Supplies and equipment (incl. freight)		Training grants		Project staff		Other cash		Totals		
	GR	FSF	GR	FSF	GR	FSF	GR	FSF	GR	FSF	Total
Health	169	838	2	159		189	309	212	480	1398	1878
Water supply and sanitation		1367		18		281		476		2142	2142
Nutrition		219	4	39		17	89	55	93	330	423
Education	32	77	51	221	5		171	138	259	436	695
Community organization and development	19	167		92		341	1	254	20	854	874
Children in especially difficult circumstances								26		26	26
Emergency		33								33	33
Planning and project support					368		160	1	528	1	529
GRAND TOTAL	220	2701	57	529	373	828	730	1162	1380	5220	6600

GR = General resources.
FSF = Funded supplementary funding.

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TABLE 3. PLANNED EXPENDITURE, 1992-1996

(In thousands of United States dollars)

Country: NICARAGUA Period covered: 1992-1996	Funding status	1992	1993	1994	1995	1996	Total
Health	GR	200	200	200	225	225	1050
	FSF	210					210
	USF(R)	1000	1000	1000	1000	1000	5000
Education	GR	225	225	225	200	200	1075
	FSF	172	101				273
	USF(R)	525	525	275	275	275	1875
Children in especially difficult circumstances	GR	150	150	150	150	150	750
	USF(R)	300	300	300	300		1200
	NSF	498	687	680	605	530	3000
Monitoring and evaluation	GR	50	50	50	75	75	300
Planning and social policy support	GR	175	175	175	150	150	825
Programme support	GR	200	200	200	200	200	1000
Integrated rural development	FSF	1000					1000
	NSF		1500	1500	1500	1500	6000
Rural water and sanitation	FSF	832	467	492	482	251	2524
	USF(R)	215	693	792	410		2110
Urban water and sanitation	NSF	146	159	195	227	85	812
TOTAL	GR	1000	1000	1000	1000	1000	5000
	FSF	2214	568	492	482	251	4007
	USF(R)	2040	2518	2367	1985	1275	10185
	NSF	644	2346	2375	2332	2115	9812
GRAND TOTAL		5898	6432	6234	5799	4641	29004

GR = General resources.
NSF = New supplementary funding.
FSF = Funded supplementary funding.
USF(R) = Unfunded supplementary funding subregional.

TABLE 4. STAFFING FROM BUDGET AND PROGRAMME FUNDS

COUNTRY: NICARAGUA	Number of posts	Amount (Thousands of United States dollars)
FINANCED FROM 1992-1993 APPROVED BUDGET:		
International Professional established posts	2	478
Local national Professional and General Service established posts	4	281
Operating costs		501
Total	6	1260
FINANCED FROM PROGRAMME FUNDS: a/		
International Professional project posts		
General resources	1	226
Supplementary funds	3	632
Local national Professional and General Service project posts		
General resources	5	210
Supplementary funds	11	426
Total	20	1494

a/ For information source, see the 1992 revised post authorization table, dated 23 July 1991.